

STATEMENT OF SUBSTANCE OF INTERVIEW

Applicant, Lawrence M. Sherman, and Applicant's representative and the undersigned attorney of record, Carol H. Peters, met with Examiner Pass on July 10, 2007 at the U.S. Patent Office in Alexandria for a personal interview to discuss the instant application. The invention was generally described by Mr. Sherman. Amendments to the pending independent Claim 59 were discussed to place the Claim in order for acceptance or appeal. Examiner Pass requested Applicant submit his response to the Office Action mailed February March 8, 2007 with consideration of such claim amendments.

AMENDMENTSProposed Amendments to Claims Under 37 C.F.R. § 1.121(c)

Applicant respectfully requests amendment of Claims 27, 32-35, 37-45, 48 and 66, and cancellation of Claims 36, 51-54, 60-61, 64-65 and 67-72. In addition, Applicant respectfully requests addition of new Claims 73-76 to the instant application.

IN THE CLAIMS:

1-26. Cancelled.

27. (Currently amended) The method of claim 59 further comprising receiving, as part of said input data, information relating to one or more terms of said primary insurance policy, and further determining eligibility of said one or more persons for said secondary insurance policy based upon said one or more terms.

28. (Previously presented) The method of claim 27 wherein said one or more terms includes a benefit amount of said primary insurance policy.

29. (Previously presented) The method of claim 27 wherein said one or more terms includes a date of issuance of said primary insurance policy.

30. (Previously presented) The method of claim 27 wherein said one or more terms includes an expiration date of said primary insurance policy.
31. (Previously presented) The method of claim 27 wherein said one or more terms includes one or more conditions that would, if met, void said primary insurance policy.
32. (Currently amended) The method of claim 27 wherein said one or more terms includes one or more statements received from at least one of said one or more persons in connection with the health of said at least one of said one or more persons.
33. (Currently amended) The method of claim 27 wherein said one or more terms of ~~the primary insurance policy~~ includes an age of at least one of said one or more persons.
34. (Currently amended) The method of claim 27 wherein said one or more terms of ~~said primary insurance policy~~ includes the total number of said one or more persons.
35. (Currently amended) The method of claim 27 wherein said one or more terms of ~~said primary insurance policy~~ includes one or more conditions precedent to payment of said benefit amount.
36. Cancelled.
37. (Currently amended) The method of claim 36 59 wherein said one or more underwriting standards includes one or more statements received from at least one of said one or more persons in connection with said person's health.
38. (Currently amended) The method of claim 36 59 wherein said one or more underwriting standards includes an age of at least one of said one or more persons.

39. (Currently amended) The method of claim 36 59 wherein said one or more underwriting standards includes a profession of at least one of said one or more persons.

40. (Currently amended) The method of claim 36 59 wherein said one or more underwriting standards includes a benefit amount of said primary insurance policy.

41. (Currently amended) The method of claim 36 59 wherein said one or more underwriting standards includes a term during which said primary insurance policy is effective.

42. (Currently amended) The method of claim 36 59 wherein said one or more underwriting standards includes one or more responses received from at least one of said one or more persons in response to one or more antiselection questions.

43. (Currently amended) The method of claim 59 wherein said at least one secondary benefit amount is less than a primary benefit amount provided under said primary insurance policy.

44. (Currently amended) The method of claim 59 further comprising receiving,as part of said input data, information from at least one of said one or more persons in response to one or more queries and further determining eligibility of said one or more persons for said secondary insurance policy based on said response information.

45. (Currently amended) The method of claim 59 further comprising receiving,as part of said input data, outcome of one or more risk reduction procedures and further determining eligibility of said one or more persons for said secondary insurance policy based on said risk reduction procedure outcome.

46. (Previously presented) The method of claim 45 wherein one or more risk reduction procedures includes establishing a period of time during which an offer for said secondary insurance policy is effective.

47. (Previously presented) The method of claim 45 wherein one or more risk reduction procedures includes establishing a period of time within which a payment of a premium for said secondary insurance policy is required.

48. (Currently amended) The method of claim 59 further comprising receiving, as ~~part of said input data,~~ information related to at least one beneficiary of said secondary insurance policy.

49. (Previously presented) The method of claim 48 wherein said at least one beneficiary of said secondary insurance policy includes at least one beneficiary of said primary life insurance policy.

50-58. Cancelled.

59. (Currently amended) A computer-implemented method ~~for~~ of providing additional insurance for one or more persons as a secondary insurance policy provided by a secondary insurer based on an underwriting approval of said one or more persons ~~provided by a select primary insurer provides~~ for a primary insurance policy, the computer-implemented method comprising:

~~providing a computer configured for receiving input data including information identifying said one or more persons, at least one secondary benefit amount provided by said secondary insurance policy, and one or more underwriting standards which said primary insurer uses to provide said underwriting approval of said one or more persons for said primary insurance policy; and for~~

~~processing and converting said input data into output data defining said secondary insurance policy, said secondary insurance policy being issued by said secondary insurer, said secondary insurer being a different insuring entity from said primary insurer, and said secondary insurance policy being a separate policy from said primary insurance policy independent in effect from and without affect to said primary insurance policy and any benefits of said primary insurance policy;~~

~~receiving, as part of said input data, one or more underwriting standards said select primary insurer uses to provide said underwriting approval of said one or more persons for said primary insurance policy,~~

~~wherein said processing and converting said input data into said output data includes determining a determination by said secondary insurer of whether said one or more underwriting standards meets one or more criteria said secondary insurer applies to determine if said secondary insurer can rely upon said underwriting approval of said select primary insurer for said primary insurance policy to provide said secondary insurance policy;~~

~~receiving, as part of said input data, information identifying said one or more persons and at least one secondary benefit amount of said secondary insurance policy; and~~

~~if said secondary insurer can rely upon said underwriting approval of said primary insurer based upon said determination, to provide said secondary insurance policy, generating, as part of said output data, an indication of acceptance of said one or more~~

~~persons for said secondary insurance policy; and using said output data to define and to issue~~ said secondary insurance policy, said secondary insurance policy creating an obligation of said secondary insurer to pay said ~~at least one~~ secondary benefit amount ~~independent of said primary insurance policy and any benefits of said primary insurance policy, wherein said payment of said at least one secondary benefit amount is not conditioned upon payment of one or more benefit amounts provided by said primary insurance policy.~~

60-65. Cancelled.

66. (Currently amended) A method of providing additional insurance for one or more persons as an additional ~~or replacement~~ insurance policy, the method comprising:

identifying a prior insurer that provided a previously issued insurance policy for said one or more persons;

determining whether said prior insurer provided an underwriting approval of said one or more persons for said previously issued insurance policy; and

~~if said prior insurer provided said underwriting approval of said one or more persons for said previously issued insurance policy, determining whether said prior insurer is a select prior insurer, said select prior insurer being designated by an additional insurer providing said additional or replacement insurance policy as using acceptable underwriting standards; and~~

~~if said prior insurer is a select prior insurer, providing without underwriting issuing said additional or replacement insurance policy based upon said determination to provide additional insurance for said one or more persons,~~

said determination made by a second or other insurer and said additional or replacement insurance policy being issued by said second or other insurer, said second or other insurer being a different insuring entity from said prior insurer and said additional insurance policy being a separate policy from independent in effect from and without affect to said previously issued insurance policy, and

said additional insurance policy providing at least one benefit amount for said one or more persons independent of said previously issued insurance policy and, wherein payment of said at least one benefit amount is not conditioned upon payment of any benefits of provided by said previously issued insurance policy.

67-72. Cancelled.

73. (New) A method of providing additional insurance for one or more persons as a secondary or additional insurance policy issued by a secondary or other insurer based upon whether underwriting approval of said one or more persons was provided by a primary or prior insurer for a primary or previously issued policy, the method comprising:

receiving information identifying said one or more persons, at least one benefit amount and at least one beneficiary of said secondary or additional insurance policy;

receiving information identifying said primary or prior insurer that issued said primary or previously issued insurance policy to said one or more persons;

determining whether said primary or prior insurer provided an underwriting approval of said one or more persons for said primary or previously issued insurance policy, said determination made by said secondary or other insurer; and

if said primary or prior insurer provided said underwriting approval, issuing said secondary or additional insurance policy based upon said determination and from said information identifying said one or more persons, said at least one benefit amount and said at least one beneficiary, said secondary or additional insurance policy being issued by said secondary or additional insurer, said secondary or additional insurer being a different insuring entity from said primary or prior insurer, and said secondary or additional insurance policy being a separate policy from said primary or previously-issued insurance,

wherein the payment of said at least one benefit amount is not conditioned upon the payment of any benefit amount provided by said primary or previously issued insurance policy.

74. (New) The method of claim 73, wherein issuing said secondary or additional insurance policy includes issuing said secondary or additional insurance policy without performing underwriting of said one or more persons.

75. (New) The method of claim 73, wherein issuing said secondary or additional insurance policy includes issuing said secondary or additional insurance policy without performing medical underwriting of said one or more persons.

76. (New) A method of providing additional insurance for one or more persons as a secondary or additional insurance policy issued by a secondary or other insurer based upon whether underwriting approval of said one or more persons was provided by a primary or prior insurer for a primary or previously issued policy, the method comprising:

receiving information identifying said one or more persons, at least one benefit amount and at least one beneficiary of said secondary or additional insurance policy;

receiving information identifying said primary or prior insurer that issued said primary or previously issued insurance policy to said one or more persons; and

determining whether said primary or prior insurer provided an underwriting approval of said one or more persons for said primary or previously issued insurance policy, said determination made by said secondary or other insurer;

if said primary or prior insurer provided said underwriting approval, issuing said secondary or additional insurance policy based upon said determination and from said information identifying said one or more persons, said at least one benefit amount and said at least one beneficiary, said secondary or additional insurance policy being issued by said secondary or additional insurer, said secondary or additional insurer being a different insuring entity from said primary or prior insurer, and said secondary or additional insurance policy being a separate policy from said primary or previously-issued insurance,

wherein the payment of said at least one benefit amount is conditioned upon the payment of any benefit amount provided by said primary or previously issued insurance policy.